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2012 AUG 15 AM 8: 44

FEC MAIL CENTER **Committee Name:** RHODE ISLAND HORSE ASSOCIATION If registered, FEC ID: Today's Date: 08/10/2012

Federal Election Commission 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

ulie Caramante Treasurer's Name:

Julie Caramante

Treasurer

12030874053

FEC FORM 1

STATEMENT OF ORGANIZATION

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FORM 1		ORGANIZATION			FEG MAIL CENTER		
1. NAME OF COMMITTEE (in	n full)	(Check if nar is changed)		mple:If typing, type r the lines.	12FE4M		
RHODE IS	LAND	HORSE A	3\$OCI	ATION			
ADDRESS (number a	nd street)						
(Check if address							
is changed)							
			CITY		STATE	ZIP CODE	
COMMITTEE'S E-MA (Check if is change	address	S (Please provide only [rihorseass		n@gmail.cor	γ n		
COMMITTEE'S WEB	address		dhorse	association.	tumblr,	com.	
2. DATE	/	/					
3. FEC IDENTIFIC	CATION NU	MBER					
4. IS THIS STATE	MENT 🔀	NEW (N)	OR [AMENDED (A)			
Type or Print Name Signature of Treasure	of Treasurer er false, errones	Julie Cara	amante	ante_	Date Ö	3 10° 2012 to the penalties of 2 U.S.C. §437g.	
Office Use Only		IN INFO		For further information c Federal Election Commissis Toll Free 800-424-9530 Local 202-694-1100	ontact:	FEC FORM 1 (Revised 02/2009)	

I	FEC Fo	rm 1 (Revised 02/2009)	Page 2				
TYPE OF COMMITTEE							
Candidate Committee:							
(a)	(a) This committee is a principal campaign committee. (Complete the candidate information below.)						
(b)	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)						
Name Cand							
	lidate Affiliatio	on Office Sought: House Senate President	State ,				
(c)		This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name Cand							
Parl	ty Con	nmittee:					
(d)		N N N	nocratic, ublican, etc.) Party.				
Poli	tical A	ction Committee (PAC):					
(e)		This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connec	ted organization is a:				
		Corporation Corporation w/o Capital Stock	bor Organization				
			poperative				
		In addition, this committee is a Lobbyist/Registrant PAC.					
(f)	\boxtimes	This committee supports/opposes more than one Federal candidate, and is NOT a separate segre committee. (i.e., nonconnected committee)	gated fund or party				
		In addition, this committee to a Lobbyist/Registrant PAC.					
		In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
Join	t Fund	Iraising Representative:					
(g)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two o committees/organizations, at least one of which is an authorized committee of a federal candidate.	r more political				
(h)		This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or committees/organizations, none of which is an authorized committee of a federal candidate.	more political				
	Com	mittees Participating in Joint Fundraiser					
	Com	1					
	1.	PEC ID NUMBER IC	: <u></u>				
	2.	FEC ID number C					
	3.	FEC ID number C					
	4.	FEC ID number					

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Marie L
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FEC Form 1 (Revis	sed 02/2009)	Page 3			
Write or Type Committee N		-			
RHODE ISLA	ND HORSE ASSOCIATION				
6. Name of Any Connecte	ed Organization, Affiliated Committee, Joint Fundraising Representative, or	Leadership PAC Sponsor			
Nono					
None					
Mailing Address					
		<u> </u>			
	CITY STATE	ZIP CODE			
Relationship: Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC Sponsor					
7. Custodian of Records: books and records.	Identify by name, address (phone number optional) and position of the person	on in possession of committee			
Full Name Pau	ıla Baçon	1			
	1504 S. Houston Street				
Mailing Address					
	ıKaufman ı ı ı ı ı ı ı ı ı ı ı ı ı ı ı ı ı ı ı	₁ 75142 ₋			
Title or Position	CITY STATE	ZIP CODE			
Custodian of F	Records Telephone number 1972				
8. Treasurer: List the name any designated agent (e	e and address (phone number optional) of the treasurer of the committee; an .g., assistant treasurer).	nd the name and address of			
Full Name Juli	e Caramante				
Mailing Address	1504 S. Houston Street				
	Kaufman TX STATE	75142 ZIP CODE			
Title or Position	1 1281				
Treasurer	Telephone number [281]	7664040			

FEC Form 1 (Revis	sed 02/2009)		Page 4		
	-				
Full Name of Designated Agent Paula	a Bacon				
Mailing Address	1504 S. Houston Street				
	[Kaufman city ΄	STATE	[75142		
Title or Position Assistant Treasure	er Telephone	number 972	2824[1073		
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc. JPMorgan Chase Bank					
Mailing Address	811 Preston Road				
	[Dallas , , , , , , , , , , , , , , , , , , ,	I [TX]	75525		
	CITY	STATE	ZIP CODE		
Name of Bank, Depository	, etc.	· · ·			
		 			
Mailing Address					
		لبال	<u> </u>		
	CITY	STATE	ZIP CODE		

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